

Borough of Bedford



School Health Service

1973

B O R O U G H O F B E D F O R D

COMMITTEE FOR EDUCATION

SCHOOL HEALTH SERVICE

1973

REPORT

of the

SCHOOL MEDICAL OFFICER

COMMITTEE FOR EDUCATION

(at 31 December 1973)

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ACTING BOROUGH EDUCATION OFFICER

A.C. COLLING, MA, DipEd

SCHOOL MEDICAL OFFICER

J.G.M. MORTIMER, MB, ChB, MFCM,
DObst, RCOG, DPH



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TO: HIS WORSHIP THE MAYOR,
CHAIRMAN AND MEMBERS OF
THE COMMITTEE FOR EDUCATION

JANUARY 1974

During the final months of 1973 we have been involved with the other two authorities within the area of the new Bedfordshire Area Health Authority in preparing for the forthcoming reorganisation of the Health Service on 1 April 1974.

In looking at the School Health Services provided by the three authorities, we recognise the differences in the pattern of medical procedures and different methods which have been adopted by the three authorities and it will be necessary to modify certain of these procedures and methods to obtain an overall common service after reorganisation; however, any such modification must be seen to improve the effectiveness of the service.

The main reason for the reorganisation of the Health Service is to improve the service and, within the constraints of limited financial resources, opportunities will be sought to redeploy resources to improve effectiveness.

One such deployment is the decision to screen for hearing defect all Borough children following school entry rather than at the age of 7 years as at present. This will allow a further audiometric screening at a later age when resources are made available.

Another example of such redeployment of resources follows the revision by Bedfordshire County Council of the Byelaws controlling the employment of children.

Until this year these Byelaws required that any child under the age of 15 years proposing to undertake part time employment, should be provided with a medical certificate from a School Medical Officer stating that in his opinion the work involved will not be prejudicial to the child's health and therefore, every such child was subjected to a medical examination.

In the revised Byelaws the relative sub-section reads: 'if required by the Local Authority the child shall be medically examined to ensure that such employment will not be prejudicial to the health or physical development of the child and will not render him unfit to obtain proper benefit from his education'.

It is understood that the Local Authority will only 'require' a medical certificate if there is reasonable evidence to suggest that the employment is prejudicial to the child's health.

Accordingly, therefore, as from 1 December 1973 routine medical examination of all children proposing to undertake part time employment in the Borough ceased.

Table 19 details the numbers of such examinations which were carried out by Medical Officers in the Borough. Many of these children although undertaking employment in the Borough did not attend Borough schools and so their medical records were not available. Following reorganisation, with the integration of the Borough services with those of the County, all records for children in the northern half of the County will be under a unified administrative control.

The statistics displayed in the body of the report confirms that in the Borough we have continued to provide a full service, and in the Appendix is displayed the programme of medical procedures offered to all children

attending maintained schools in the Borough. These procedures are designed to ensure the maintenance of the child's health, and to identify medical conditions which affect the child's education and which should be further investigated and their treatment ensured.

The possibility of extending the full range of the School Health Services including dentistry into non-maintained schools following reorganisation must now be considered. Whilst the School Health Service was provided through the local rates one can justify the exclusion of fee paying pupils from the benefits of the School Health Service, but after 1 April 1974, the School Health Service will be provided through central Government funds and therefore we cannot justify the exclusion of any child from the full range of the service.

In Table 2, one will see that as a result of the introduction of selective examinations, some 70% of children are deemed not to warrant a full medical examination.

Our experience of the selective process confirms our conviction that, supported by a frequent sequence of screening examinations (viz. vision and hearing) the selective process could be introduced at the time of the school leaver examination. It is at this examination that any defect likely to be aggravated by specific type of employment is identified and the child and careers' officer advised. The first few years in employment are critical and we constantly strive to ensure that, especially where the child is handicapped, the choice of employment is appropriate.

The introduction of the Employment Medical Advisory Service this year has strengthened our ability to advise child and employer on the most appropriate form of employment for each child leaving school, and, on this basis, is established an integrated and expert medical service with wide duties in occupational medicine.

with the introduction of new school record cards in the lower and middle schools, we see an opportunity in using this card as a collaboration record to allow improved communication between teacher and doctor. With the agreement of the head teacher, the visiting examining doctor, can enter on the child's school record card any medical finding which has an educational impact - the teacher can also enter a note of any medical matter brought to his attention by the parent. In this way, both teacher and doctor have a shared document and the chances of failure of communication are lessened.

I am again pleased to include the following report on the School Dental Service in the Borough, from Mr H.W. Sheasby, Principal School Dental Officer.

ANNUAL REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER, 1973 (BOROUGH OF BEDFORD)

'With the transfer to the National Health Service so nearly upon us this last full year under Local Government control could, as it turned out, be only a holding operation. Recruitment of young dentists was in the event reduced to nil, probably because of the uncertainty of the situation. On 1 May 1973 the British Dental Association warned all members that transfer to Local Authority service before 1 April 1974 might adversely affect their pension rights. This further reduced any chances we might have had of attracting staff.

Under these circumstances, we could hope at best only to maintain the standards set through the gains made in recent years, and this in the main was accomplished. Approximately 80% of the children on roll were dentally inspected, still very much above the national average though a drop of 10% on the 1972 record figure for Bedford. Treatment totals were, however, generally up to last year. The number of treatment sessions and of courses of treatment both commenced and completed all showed an appreciable increase.

The ratio between fillings and extractions was (as for several years past) still further improved, and the number of times general anaesthetics were

required for extractions again fell. A start was made with the new fissure-sealing material the use of which was forecast in the report for the previous year. Though it is, of course, much too early to assess results we are satisfied with our experience of it so far. The first year of the Health Education's Dental Health Education project was completed satisfactorily, except that a very slight shortfall on the programme arranged will be made good at the beginning of 1974. Mr G.F. Willcox, Area Dental Officer for the Borough, is undertaking all the mouth examinations for this project, which has been undertaken to find the best way to impart knowledge about dental health to school children. There seems to be no doubt that the project is intensifying interest in dental health among both children and parents, and we hope that this promises well for the future.

Mr Willcox has been assisted in his clinical duties, as in past years, by several other Dental Officers. All of the four dental clinics (one of which is mobile) within the Borough have been manned, though only the central one in Union Street (with three surgeries) full-time.

The Orthodontist, Mr C.J.R. Kettler, continues to be kept very busy, but since he has reduced the number of sessions with us there has inevitably been a corresponding fall in patients treated. The assistance provided by the Dental Auxiliary, particularly among the younger patients, has again been very valuable.

Finally, the most valuable advance made in 1973 in the educational field which directly affects the health and educational prospects of the younger children in the Borough has been the opening of the Peter Pan Nursery School. The concept of a nursery school with extended hours, bridges the gap between the full day provision of a Day Nursery (under the Department for Social Services) and the school hours of an ordinary school (under Education Department).

My arguments over the past few years in favour of more pre-school places were based on the premise that all children and especially handicapped children, would benefit from education from as early an age as possible. As I stated in the report for 1972, we have depended on both the Day Nursery and the Spastics Centre for most of the educational provision for pre-school handicapped children. The opening of the Peter Pan Nursery is a major step forward in this provision and allowed us to transfer to nursery schools the children attending the assessment playgroup held at Brickhill Clinic every Monday morning, but the full needs of pre-school handicapped children will not be met until the assessment centre now in its planning stage, is commissioned.

Indubitably, the reorganisation of the Health and Education administration structures will give rise to opportunities for improvement in the services. It will be for those of us who bridge the gap between Education and Health, to grasp these opportunities.

J.G.M. MORTIMER
School Medical Officer

S C H O O L R O L L

Table 1

<u>Type of School</u>	<u>No. of Schools</u>	<u>No. on Roll</u>
Nursery	2	98
Primary/Lower	21	7,288
Middle	4	1,868
Secondary	5	2,658
Upper	3	1,857
TOTALS Year 1973	<u>35</u>	<u>13,769</u>
Totals Year 1972	31	13,157
Totals Year 1971	31	12,919

Periodic Medical Inspections

Table 2

Age Groups inspected (By Year of Birth)	Pupils who have received a full medical examination	PHYSICAL CONDITION OF PUPILS INSPECTED		Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental infestation with			Total individual pupils
		Satisfactory	Unsatisfactory		for defective vision (excluding squint)	for any other condition		
1969 and later	58	58	-	-	-	7	7	7
1968	870	869	1	-	14	66	66	75
1967	438	436	2	-	4	23	23	25
1966	22	22	-	-	-	1	1	1
1965	4	4	-	-	-	1	1	1
1964	-	-	-	-	-	-	-	-
1963	20	20	-	126	1	3	3	4
1962	173	173	-	590	14	32	32	38
1961	81	81	-	186	3	7	7	11
1960	-	-	-	-	-	-	-	-
1959	-	-	-	-	-	-	-	-
1958 and earlier	892	892	-	-	52	88	88	130
Totals 1973	2558	2555	3	902	88	228	228	292
1972	3018	3018	-	994	89	280	280	338
1971	2433	2430	3	838	98	259	259	328

OTHER INSPECTIONS

Table 3

	1973	1972	1971
Number of special inspections *	341	380	440
Number of re-inspections **	373	464	467
Totals	714	844	907

* A special inspection is one which is carried out at the request of the teacher or the parent

** A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection

INFESTATION WITH VERMIN

Table 4

	1973	1972	1971
Individual examination of pupils in schools by school nurses	25,514	26,489	23,253
Pupils found to be infested	128	143	130
Pupils who were infested once	102	114	79
" " " " more than once	26	29	22
Cleansing notices issued under the Education Act 1944 -			
Section 54 (2)	-	-	-
Section 54 (3)	-	-	-
No of children cleansed at Borough Cleansing Station	-	-	8

Table 2

DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS

Defect or Disease	Periodic Inspections										Special Inspections	
	(T - Treatment)					(O-Observation)					T	O
	Entrants		Leavers		Total	Others		Total				
	T	O	T	O		T	O					
Skin	10	50	19	23	3	10	32	83	2	2		
Eyes vision	18	52	52	43	18	12	88	107	13	2		
squint	17	25	-	5	5	1	22	31	4	-		
other	3	3	-	18	-	8	3	29	-	27		
Ears hearing	18	43	6	7	5	7	29	57	18	56		
otitis media	1	8	1	1	4	1	6	10	-	-		
other	1	5	3	2	-	-	4	7	-	6		
Nose and throat	3	53	5	10	3	12	11	75	1	-		
Speech	3	29	-	1	1	-	4	30	7	-		
Lymphatic glands	-	12	-	-	-	1	-	13	-	2		
Heart	1	22	3	7	2	10	6	39	-	1		
Lungs	5	12	3	4	-	6	8	22	-	-		
Developmental hernia	-	5	1	-	-	-	1	5	1	16		
other	3	15	10	2	7	5	20	22	14	-		
Orthopaedic posture	-	8	4	9	1	6	5	23	-	-		
feet	8	74	14	14	5	9	27	97	1	-		
other	2	28	4	9	1	6	7	43	4	-		
Nervous system epilepsy	3	4	-	1	-	1	3	6	-	1		
other	2	7	-	1	1	-	3	8	-	-		
Psychological development	7	24	3	2	1	2	11	28	4	3		
stability	6	20	7	4	3	9	16	33	51	2		
Abdomen	2	12	-	1	-	2	2	15	-	-		
Other	2	15	5	9	1	5	8	29	91	20		
1973	115	526	140	173	61	113	316	812	208	138		
1972	190	603	122	171	57	143	369	917	208	181		
1971	184	589	119	190	54	100	357	879	278	171		

Table 6

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Cases known to have been dealt with		
	1973	1972	1971
External and other, excluding errors of refraction and squint	-	-	1
Errors of refraction (including squint)	571	530	589
Totals	571	530	590
Pupils for whom spectacles were prescribed	143	127	124

Table 7

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	1973	1972	1971
Pupils who received -			
Operative treatment			
(a) for diseases of the ear	-	1	3
(b) for adenoids and chronic tonsillitis	2	5	23
(c) for other nose and throat conditions	-	1	-
Other forms of treatment	-	5	10
Totals	2	12	36
Pupils on registers at 31st December 1973 provided with hearing aids:-			
With new aids	7	5	2
With aids supplied in other years	31	28	30
Totals	38	33	32

	1973	1972	1971
Pre-school children provided with new aids	4	3	2
With aids supplied in other years	1	5	-

TABLE 8

DISEASES OF THE SKIN
(excluding uncleanliness)

	1973	1972	1971
Ringworm - (a) Scalp	1	2	-
(b) Body	-	2	1
Scabies	14	7	12
Impetigo	1	4	1
Other skin diseases	4	17	4
	20	32	18

N.B. 30 cases of verrucae were notified during the year 1973

Table 9

CHILD GUIDANCE TREATMENT

	1973	1972	1971
Pupils treated at Child Guidance Clinics	129	131	139

Table 10

SPEECH THERAPY

	1973	1972	1971
Pupils treated by speech therapists	282	189	202

Table 11

OTHER TREATMENT GIVEN

	1973	1972	1971
Pupils with minor ailments	31	59	52
Pupils who received convalescent treatment under School Health Service arrangements	-	-	-
Other than above	-	-	-
Pupils issued with Enuresis Alarms	35	53	41

Attendances & Treatment	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit	1546	1250	330	3126
Subsequent visits	2547	2672	628	5847
Total visits	4093	3922	958	8973
Additional courses of treatment commenced	138	190	48	376
Fillings in permanent teeth	1144	2334	925	4403
Fillings in deciduous teeth	2757	314	-	3071
Permanent teeth filled	836	1955	740	3531
Deciduous teeth filled	2381	283	-	2664
Permanent teeth extracted	74	369	122	565
Deciduous teeth extracted	1308	426	-	1734
General anaesthetics	359	114	16	489
Emergencies	69	65	11	145

Number of pupils X-rayed	308
Prophylaxis	1154
Teeth otherwise conserved	154
Number of teeth root filled	10
Inlays	2
Crowns	6
Courses of treatment completed	3100

<u>Orthodontics</u>	
Cases remaining from previous year	-
New cases commenced during year	50
Cases completed during year	43
Cases discontinued during year	1
No. of removable appliances fitted	73
No. of fixed appliances fitted	35
Pupils referred to Hospital Consultant	-

Prosthetics	5 - 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time)	-	-	-	-
Pupils supplied with other dentures (first time)	3	6	10	19
Number of dentures supplied	3	6	10	19

<u>Anaesthetics</u>	General Anaesthetics administered by Dental Officers	8
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Inspections	1973	1972	1971
(a) First inspection at school. Number of pupils	8,665	10,071	9,467
(b) First inspection at clinic. Number of pupils	1,815	1,592	1,639
Number of (a) (b) found to require treatment	5,641	5,620	5,820
Number of (a) (b) offered treatment	5,629	5,618	5,820
(c) Pupils re-inspected at school or clinic	382	400	335
No of (c) found to require treatment	350	291	256

Sessions	1973	1972	1971
Sessions devoted to treatment	1,380.1	1,262.4	1,378.9
Sessions devoted to inspection	72.8	80.2	81.8
Sessions devoted to Dental Health Education	39.0	1.0	-

Table 13

AUDIOMETR SERVICE

<u>Sweep Testing</u>	No. of Infants passed				2,302
	No. of Infants failed				172
	No. of Infants tested				2,474
<u>Specials</u> <u>(Referrals and</u> <u>Re-tests)</u>	Pass				195
	Fail				122
Total Number of Tests		1973	1972	1971	
		2,791	1,473	1,492	

Table 14 (a)

HANDICAPPED PUPILS

The following table shows the number of children attending special schools because of the handicaps mentioned:

	1973	1972	1971
Blind and partially Sighted	3	4	4
Deaf and partially Hearing	14	10	8
Epileptic	1	1	1
Physically Handicapped	7	3	5
Delicate	4	3	5
Educationally Sub-Normal	2	3	2
Severely Sub-Normal	41	-	-
Maladjusted	6	9	12
Other	9	1	-

Table 14 (b)

PHYSICALLY HANDICAPPED PUPILS IN ORDINARY
SCHOOLS

	BOYS	GIRLS	TOTAL
Deaf and partially hearing	41	27	68
Blind and partially sighted	1	-	1
Epileptic	15	12	27
Physically handicapped	17	20	37
Delicate	17	12	29
Other	10	3	13

Table 14 (c)

EDUCATIONALLY SUB-NORMAL CHILDREN

	1973	1972	1971
Resident at St. Margaret's School Great Gaddesden	19	22	24
In attendance at Grange Day Special School, Kempston	89	88	89

PLACEMENT OF PRE-SCHOOL HANDICAPPED CHILDREN

TABLE 15	Assessment Playgroup Kempston						Bedford Day Nursery						Drayton House						Not yet placed						Pearcey Road Nursery						Peter Pan Nursery								
YEAR OF BIRTH	1973	1972	1971	1970	1969	1968 Sept. - Dec.	1973	1972	1971	1970	1969	1968 Sept. - Dec.	1973	1972	1971	1970	1969	1968 Sept. - Dec.	1973	1972	1971	1970	1969	1968 Sept. - Dec.	1973	1972	1971	1970	1969	1968 Sept. - Dec.	1973	1972	1971	1970	1969	1968 Sept. - Dec.			
Blind																																							
Partially Sighted																1																							
Deaf																																							
Partially Hearing		1														2	2																						
Delicate										1						1	5	2	4																				
Epileptic																1																							
Maladjusted																																							
Mentally Retarded											1	1				2	1	1																			1		
Severely Subnormal																		1																					
Physically Handicapped						1			1							4	1																						
Speech Defect											2																												1
Undiagnosed																																							
TOTALS	-	1	-	-	-	1	-	-	1	-	3	1	-	-	1	-	-	-	1	7	3	14	12	8	1	-	-	-	-	-	1	-	-	-	-	1	-	1	

ATTACHMENT OF PRESCHOOL HANDICAPPED CHILDREN

	Priory School Nursery	Private Playgroup	Private School	Queens Park Mentally Handicapped Playgroup	Residential School	Stephenson Partially Hearing Unit
YEAR OF BIRTH	1973 1972 1971 1970 1969 1968 Sept.-Dec.	1973 1972 1971 1970 1969 1968 Sept.-Dec.	1973 1972 1971 1970 1969 1968 Sept.-Dec.	1973 1972 1971 1970 1969 1968 Sept.-Dec.	1973 1972 1971 1970 1969 1968 Sept.-Dec.	1973 1972 1971 1970 1969 1968 Sept.-Dec.
Blind						
Partially Sighted						
Deaf					1	
Partially Hearing					1 1	1
Delicate						
Epileptic						
Maladjusted						
Mentally Retarded				1		
Severely Subnormal				2		
Physically Handicapped		1				
Speech Defect		1 1				
Undiagnosed						
TOTALS	- - . 1 .	. 3 2	- - - 1 -	- - - 3 -	- - - 1 1	- - - 1

Table 16

TUBERCULIN TEST AND B.C.G. VACCINATION
CHILDREN 3 YEARS AND UPWARDS

School Children and Students

	1973	1972	1971
No. skin tested	1,569	1,116	1,550
No. found positive	81	96	218
No. found negative	1,406	923	1,208
No. vaccinated	1,402	922	1,205

Tuberculin Testing - Heaf Method - School Entrants

	1973	1972	1971
Consent given	1,121	1,122	1,158
Consent not given	152*	181*	192*
No. of children tested	950	978	1,003
No. found to be negative	906	954	962
No. found to be positive	Grade I 28 Grades II, III, IV - 16	Grade I 21 Grades II, III, IV 3	41
Absent from school at time of test	156	119	134
Left school before test given	15	25	21

* Of these numbers the greater part had received B.C.G. vaccination, or were under observation at the Chest Clinic.

INFECTIOUS DISEASES

Cases of Infectious Diseases amongst School Children
Notified during the Year

	1973	1972	1971
Measles	92	3	75
Scarlet Fever	4	5	11
Whooping Cough	1	-	3
Jaundice	13	1	4
Dysentery	1	1	1
Rubella	15	18	242
Typhoid	-	-	1
Food Poisoning	2	1	-
Meningococcal Infection	1	-	-
Respiratory Tuberculosis	1	3	2
TOTALS	130	32	339

Table 18

CANDIDATES FOR ADMISSION TO TEACHER TRAINING
COLLEGES AND THE TEACHING PROFESSION

	1973	1972	1971
No of medical examinations undertaken	96	87	100

Table 19

BYELAWS - EMPLOYMENT OF SCHOOL CHILDREN

	1973	1972	1971
No of children seen and certified as fit for employment	452	143	116

NOCTURNAL ENURESIS
TREATMENT WITH THE ALARM BELL SYSTEM
SURVEY OF RESULTS: 1 JANUARY - 31 DECEMBER 1973

Age	Males		Females		Total	
	Alarms Issued	Successful Results	Alarms Issued	Successful Results	Alarms Issued	Successful Results
5 - 6	5	2	2	1	7	3
6 - 7	9	6	2	1	11	7
7 - 8	2	-	1	-	3	-
8 - 9	4	-	-	-	4	-
9 - 10	-	-	1	-	1	-
10+	7	5	2	1	9	6
	27	13	8	3	35	16

APPENDIX

PROGRAMME OF MEDICAL PROCEDURES OFFERED TO ALL CHILDREN ATTENDING MAINTAINED SCHOOLS IN THE BOROUGH

Comprehensive System	Age	Present System	Age	Questionnaire to Parents	Medical Examination	Weighing and Measuring	Eye Testing	Colour Vision	Cleanliness (each term)	Hearing Test	Heaf Testing	B.C.G. Vaccination	Diphtheria, Tet. and Polio	Rubella (Girls)
Nursery	3+	Nursery	3+	*	*				*		*		*	
	4+		4+		*				*		*		*	
Lower														
	5+	Infant	5+	*	*	*	*		*	*	*		*	
	6+		6+						*					
Middle	7+	Junior	7+						*					
	8+		8+				*		*					
	9+		9+						*					
	10+		10+		Selective	Selective	*	*	*					
	11+	Secondary	11+						* Middle As required Secondary					*
	12+		12+				*		* Middle As required Secondary					
Upper	13+		13+						As required		*	*		
	14+		14+	*	*	*	*		"				* Polio & Tet. only	
	15+		15+						"					

